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Eastern Academic
Health Science Network

How to maximise patient use of digital services for health and care providers

Digital primary care

Five step guide

Digital adoption in primary care

Digital systems are the foundation upon which we will build a modern, efficient and responsive health service. Enabling information to flow between care providers as patient care moves will support delivery of a safe, convenient and personalised health and care service.

Many GP practices are now offering online transactions, such as appointment booking, repeat prescriptions and virtual routine assessments. This shift to online services will not only improve the quality of care through enhancing patients' experience of services but will also help practices to realise efficiency benefits such as reduced administrative burden and fewer missed appointments.

However, there is still a long way to go. According to the annual NHS GP patient survey (2017)[1], 85% of patients normally book their appointments over the phone. Though there have been recent drives to promote online access, only 8% say that they book their appointments online, this is despite a significant increase in the availability of booking services which raises the question – how do we support patients' to utilise online services?

1. Source: NHS England GP Patient Survey 2017 www.england.nhs.uk/statistics/statistical-work-areas/gp-patient-survey

Contents

What is digital literacy?

As we move towards greater digitisation of services in the health and care sector, it is becoming ever more vital to understand and, where necessary, help improve digital literacy within our communities. Health Education England (HEE) suggest that "Digital literacies are the capabilities which fit someone for living, learning, working, participating and thriving in a digital society."[2] Evidence shows that we are far more likely to lead healthier, happier, more productive and satisfying lives if we are truly confident and competent in digital capabilities.

Clearly supporting improvement in digital literacy among the population is a key factor in the future success of digital primary care services, but how do we do this in practical terms?

The needs of each member of each community will differ wildly - there will be those who are highly digitally literate with high expectations of online services, those who are lacking in confidence or unable to use web-based systems, or those who do not have English as a first language for example. In order to be effective, it is crucial that tailor made digital engagement programmes are carried out by health and care providers with a flexible approach to suit each individual's needs.

How do you deliver the cultural change?

In this five-step-guide, we will focus in on the patient engagement element of delivering a digital primary care service. We will draw best practice experience from a project carried out by the Lea Valley Health Federation in Hertfordshire, where they have employed a Digital Engagement Officer (DEO). Working closely with the local population to raise awareness of the services available and support education to enable uptake, the DEO has been a key factor in the federation's success with the 75,000 patients using their eight GP practices.

2. Source: Health Education England https://hee.nhs.uk/our-work/digital-literacy

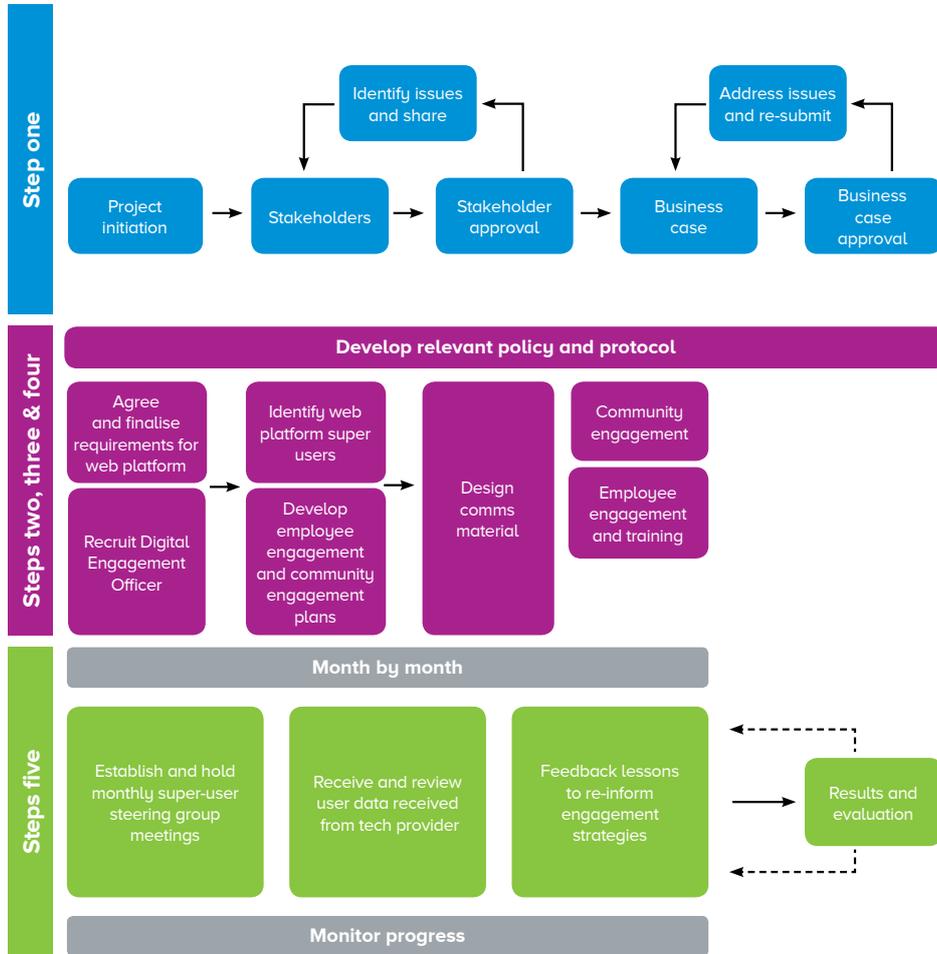In one year, the increase in the use of the digital services has resulted in:

- 3,354 phone calls avoided
- 1,399 visits in person avoided
- 584 appointments avoided

This model is a tried and tested approach to delivering greater digital literacy and uptake of digital primary care services, and this guide provides you with a step-by-step implementation plan for adoption.

It should be noted that this guide is based on a DEO supporting in an organisation with multiple practices at a number of sites. The guidance should be re-interpreted accordingly for health and care providers with a significantly smaller or larger organisational structure.

Implementation overview

Step one

Project initiation → Stakeholders → Stakeholder approval → Business case → Business case approval

Identify issues and share

Address issues and re-submit

Steps two, three & four

Develop relevant policy and protocol

Agree and finalise requirements for web platform

Recruit Digital Engagement Officer

Identify web platform super users

Develop employee engagement and community engagement plans

Design comms material

Community engagement

Employee engagement and training

Steps five

Month by month

Establish and hold monthly super-user steering group meetings

Receive and review user data received from tech provider

Feedback lessons to re-inform engagement strategies

Results and evaluation

Monitor progress

Step 1
Developing the business case

For the purposes of this guide, we are presuming that your practice has already selected a digital platform. If this is not the case, please see 'Step 2 – selecting the technology' on page 15 for guidance on what to consider when choosing your technology provider.

In order to build a robust business case for the recruitment of a DEO, it will be necessary to engage the key decision makers in your organisation as well as those in the wider team who will be engaging with the DEO.

You will need their support in order to succeed, therefore it is important to provide them with the right kind of information so that they can understand the benefits and how they can help.

The key facts section overleaf provides a good starting point for discussion with clinical, managerial and administrative teams.

A PowerPoint presentation is available in the digital primary care toolkit that can be used to support discussions between teams interested in this approach, as well as a draft business case template, outlining the rationale and key benefits.

Key facts

Summary

The primary objectives of providing an interactive website are:

- To activate the public to encourage self-management;

- To encourage online engagement to book appointments, order repeat prescriptions, obtain test results and ask general medical questions of the clinical team;

- To increase efficiency and quality of patient care;

- To improve organisational efficiency;

- To provide a platform for future expansion into digital health and care services; and,

- To facilitate access to community services for patients.

A reliable, easy to use web platform can act as a 'go to' hub for patients, both in terms of specific services provided by their GP surgery and the wider range of locally available help and support for those dealing with e.g. long term health conditions.

A focus on patient satisfaction and experience can also deliver business benefits for health and care providers, enabling them to increase value by delivering higher quality services at the same or reduced cost – including through:

- higher employee morale, lower staff turnover and reduced absenteeism;

- improved productivity, reduced waste and greater efficiency;

- avoided costs (e.g. enhanced recovery reducing lengths of stay) ;

- more timely responses/actions to minimise the escalation of issues; and,

- enhanced organisational reputation.[1]

Effective community and staff engagement is critical to delivering a successful online system. Therefore, in addition to the provision of the platform itself, funding will be needed to cover the salary of a locality DEO. The post holder would have a number of responsibilities which are outlined in an example job description included in the digital primary care toolkit.

Our experience with the Lea Valley Federation (patient population = 75,000) is that this remit can be delivered as a part time role, this may need reconsideration if additional responsibilities are to be added, or the community covered is significantly larger.

1. Source: NHS England GP Patient Survey 2017 www.england.nhs.uk/statistics/statistical-work-areas/gp-patient-survey

By employing a dedicated DEO, there will be greater control over the implementation and reporting impacts. For example, the DEO can help standardise policies, promotional activity, branding, knowledge exchange and collaboration between and across practices.

Population need

In the UK, digital technology is widely used by the majority of people. Over 70 per cent of UK adults own a smartphone[2], banking apps are used over 7,610 times per minute, and owners of fitness devices have increased by over 50 per cent in the past year. NHS England is providing funding and support to help implement changes that will align us better with expectations regarding how people engage with the NHS and manage their own health.

At a local level it is recommended that a 'demand audit' is conducted in order to establish the need and potential impact of a successful digital engagement programme. For example, the Lea Valley Federation conducted an audit of 10,000 patients via GP visits, pharmacy visits and visits to minor injury units (MIU). The key findings that helped them build their business case and engagement plan were as follows:

- Approx. 50% of the patient population are between 15-59;

- 79% of patients did not seek self-help or advice for their current condition;

Step 1
Developing the business case

- 62% of patients would be happy to have been seen by another appropriate clinician;

- 24% of total measured consultation activity could have been managed by using a more appropriate pathway;

- Over 50% of reception and telephone demand was non appointment related; and,

- 55% had previously used online advice but not in relation to the current episode of their medical complaint.

A list of potential questions to include in a patient audit that will help you uncover compelling data to support your business case is available in the digital primary care toolkit.

If the project incorporates multiple practices, it will be important to identify the makeup of each community, the differing demands of each practice and then tailor the approach accordingly. One size will not fit all.

Clinical effectiveness

By supporting digital health literacy and combining this with an intuitive digital health platform we can improve the take up of virtual health and care advice. This is likely to have a positive impact upon demand levels within primary care, improve access to community services and increase patient activation.

Once the web platform has been shown to be successful in answering patient queries and administrative activity through an online system, the next step is to create a strategy for it to be used for more clinical based services, for example, health reviews and self-management of long term health conditions.

Achieving better patient experience is not just important on moral grounds. It also brings wider benefits in terms of improved outcomes and reduced service costs. Research also shows that health services which score well on patient experience also perform well on clinical quality.[1]

A systematic review by Doyle and colleagues of evidence from over 500 studies demonstrates consistent positive associations between patient experience and patient safety, clinical effectiveness and resource use for a wide range of outcomes measures, settings and conditions.[1] Details of these research findings can be found in the powerpoint presentation in the digital primary care toolkit.

Further evidence of the positive association between patient experience and the clinical quality of services in general practice is provided by Raleigh and Frosini's analysis of Quality Outcomes Framework and GP Patient Survey data for 2010/11 for all general practices in England.[1]

Step 1
Developing the business case

Patient experience

Delivering a positive experience of care for patients is as important as the treatments they receive. Information is central to this and is one of the eight areas that the National Quality Board's NHS Patient Framework sets out for measuring patient experience in England.[1]

Doyle and colleagues believe that clear health information and empathetic, two-way communication that respects patients' beliefs and concerns are essential to realising these very significant and much wider benefits of enhancing patients' experience – suggesting that this could lead to patients being more informed and involved in decision-making and create an environment where patients are more willing to disclose information. Patients could have more 'ownership' of clinical decisions, entering a 'therapeutic alliance' with clinicians.

This could support improved and more timely diagnosis, clinical decisions and advice and lead to fewer unnecessary referrals or diagnostic tests. Increased patient agency can encourage greater participation in personal care, compliance with medication, adherence to recommended treatment and monitoring of prescriptions and dose.[1]

Financial investment

Costs incurred in the project should be evaluated alongside the benefits of managing significantly more of your patients needs online. The Lea Valley Federation team have noted benefits in

1. Source: NHS England GP Patient Survey 2017 www.england.nhs.uk/statistics/statistical-work-areas/gp-patient-survey

terms of the administrative and clinical team's capacity, this will also support their capability to manage anticipated future growth.

The funding requested should cover:

- The salary costs of a (part-time) locality DEO for a period of one year; and
- A budget for developing marketing material to help the DEO promote the system at community events, in practices etc.

Workforce implications

Implementing a new way of working will generate an impact on the teams involved. If managed well, employees can become advocates for change, welcome the benefits of learning new skills and the potential positive impacts of a more efficient way of working.

It is important when making significant changes in an organisation that the views of all team members are listened to, understood and taken on board before implementing the change. Levels of capability regarding use of new technology within teams will vary and this must also be respected and allowed for when considering training plans and encouraging support for a new web platform.

The DEO can provide support with engaging with your team and promoting the benefits of the new system.

The super-user steering group (outlined in Step 4) is also a useful forum in which to share best practice ideas on how best to help staff engage with patients and promote the web platform's services.

Step 2
Selecting
the technology

Selecting the right web platform for your organisation will be a key success factor in engaging your patients and your staff. We would recommend that both groups are consulted before selecting a system to establish the expectations of your staff and patients. The results of this consultation can then be used to procure the best technology provider for you.

In this section, we will provide some tips on what to think about when selecting a system.

An optimal web platform should be able to contain:

- Health and social care advice;
- Links to lifestyle advice and use of mobile apps for weight management, smoking, alcohol consumption etc;
- Forms to monitor patients with long term conditions to inform primary care reviews;
- Online forms for access to health professionals and medications; and,
- Administrative facilities to manage appointments, order repeat prescriptions and obtain test results.

If you are implementing use of a web platform throughout multiple practices, in addition, it should be able to:

- Support collaborative delivery of extended services;
- Non-practice based local services;
- Centralise administration, releasing GPs from administrative functions leaving them more time to care in the practices;
- Standardise joint working initiatives;
- Share policies and procedures;
- Share pathways and signposting; and
- Route requests.

Securely managing on line requests

All patient requests must come through to a single secure dashboard, the nerve centre of the digital practice. It must be possible to monitor how long a request has been waiting, assign it to someone else in the practice or securely respond to the patient. Ideally, the system should be able to record when the patient has viewed the response and connect records with any follow up enquiries. It should also maintain a searchable audit trail for future reference.

For ease of use by practice staff, all of the non-interactive aspects of the practice should be stored under a single tab. Practice information such as opening times, contact details,

policies and staff information can then be easily found in one place.

It will be necessary to work closely with your selected technology provider in order to establish access protocols for each element of the website, and how to use the system to collaborate and share information between multiple practices. Outlined below are examples of what information may be shared between practices and what information is likely to be unique to each practice.

1. What information is shared between practices?

The assumption is that much of the information will be identical for all practices involved. The advantage of sharing this information is that each practice can benefit from the reduction in administrative overhead as common information is only updated once for the entire organisation rather than for each practice.

The type of information we would expect to be shared is:

- Topics in any collaborative work spaces;
- Standard pro formas;
- Descriptions of how patients will use the forms;
- Information on local health and well-being centres, and local support groups;
- Patient signposting; and
- Organisational policies.

2. What information is unique to each practice?

A suitable system will allow each practice in an organisation to retain their own identity and the information that is unique to their practice. Typically, this can include:

- Practice branding: practice name, colours, logo, background image;
- Practice opening times, address, phone no., fax no., email, social media accounts; and,
- Practice Information: general information about the practice, Patient Participation Group (PPG) information, staff information, practice boundary, disabled access, clinics and services, appointment information, prescription information, practice news; and, local hospitals and minor injury units.

Step 3
Planning employee engagement and training

This section covers best practice ways of how to support the DEO in delivering employee engagement activities. The DEO can work closely with you on this engagement to ensure success in implementing your new system.

Employee engagement plan and policy

The first recommended activity is to draft an employee engagement plan which identifies the following:

- Key staff, their location and how they are likely to use the system;

- Engagement strategy i.e. what to communicate with whom, and when; and

- Activity planner i.e. how to communicate with and train staff.

In parallel, it will also be important to draft a policy document for your organisation so that all staff understand how the new system is to be managed. Where multiple sites are involved, this will help standardise the patient experience of the digital platform.

Key information to be included in the policy document is as follows:

- Objectives of the digital platform;

- Usage and information governance; and

- Principles of operational use including:

  • Super-users responsibilities. One super-user will be needed per location in a multi-practice organisation, this person should ideally be based in the reception or administrative team as they will have the most interaction with members of the public seeking information;

  • The super-user steering group's role, responsibilities, attendees and frequency of meetings (a monthly meeting is recommended.) A steering group is useful if you have multiple locations in your organisation. These group meetings can be used to collate feedback from users and determine areas for improvement. They can also be used to exchange success stories between colleagues which can then be shared with teams at each location via staff meetings.

- Training policy;

- Risk management and incident reporting; and

- Audit and/or monitoring.

An example policy document taken from the Lea Valley Federation is included in the digital primary care toolkit for further reference.

Super-users

A super-user is the on-site web platform champion within each practice, their role is to deliver the tasks outlined in the policy and terms of reference.

Their primary objectives are to train and provide key information obtained at the steering group to their colleagues, and to help promote use of the digital platform within their practice. They will also liaise with the DEO regarding usage figures and look for areas of improvement which should be shared with the DEO and other super-users at the steering group.

Engaging the right person as a super-user is central to the success of your digital engagement project, particularly if you intend for this person to take over the ongoing responsibility for use of the digital platform once the role of the DEO is no longer in place. This person does not have to be the practice manager but they should have responsibility for the following tasks:

- Responsible for reporting all faults/issues to the DEO;

- Attend a monthly super-user steering group meeting to exchange ideas, resolve issues and share learning;

- Responsible for locally training new users on the digital platform; and

- Responsible to their own practice for monitoring patient usage and engagement data (supplied by the DEO)

This role is also particularly important if there are multiple practices in your organisation. The DEO will not have the capacity to drive the day to day use of the system and collate feedback from users at all locations, this activity will need to be carried out by the super user and feedback provided to the DEO at the monthly steering group.

For example, the super-user can encourage members of their immediate team to promote the system and answer questions when a patient calls or visits the practice with a query that can be dealt with online. This day to day encouragement and support is key to successful implementation.

One of the benefits of collaboration between multiple practices is that those practices performing well can offer advice and support to those that require further development.

Training

Training on the digital platform must be multi-layered and all members of staff, regardless of position in the practice must have a minimum level of understanding about its use and capabilities. It is imperative that all staff members are aware of the capabilities of the system so that they may actively promote its use upon any patient contact. Therefore, it is recommended that each practice deliver the following levels of training:

- **Level 1 – Awareness Level** All staff to understand the basic functionality from a patient perspective, so that they are able to promote the use of the system during any patient interaction. This is particularly important for any 'new-starters' and must form a part of their induction process.

- **Level 2 – Basic Level** Those staff actively involved in the processing of any information that is created from the digital platform should have a basic understanding of how the process flows end-to-end, where their role fits in to the process and the importance of the task.

- **Level 3 – Intermediate Level** Those staff that have direct access to the system and are responsible for collating and disseminating information received via the system to other members of staff must have a good level of understanding about the processes and operational use of the system.

- **Level 4 – Advanced Level (super-user)** Staff that are identified as the practice super-user must have a detailed understanding of the system. They must be fully aware of all internal and external processes and be able to liaise with the wider organisational network, acting as a 'champion'.

Lea Valley DEO, Trisha Featley, provides tips on delivering key employee engagement objectives:

Objective 1:

Monitor website activity and escalate internally if action is required to improve uptake. Work with the locality business manager to agree target activity through the website and work with the public and practices to achieve this target.

Trisha's tip:

"Make sure that you receive data each month from the technology provider which covers the whole locality usage as well as each individual practice. Setting up a 'super-user' steering group will help make each practice be more accountable, as well as provide a forum to share best practice. I report usage statistics and trends back to the federation's business manager each month and targets are discussed periodically.

I use a 1:1 meeting weekly with my manager to lay out what my priorities are for the next week/month/3-month period. It is also a good idea to keep records of events, surgeries, groups etc. attended, this can be done in various forms, I use a simple spreadsheet."

Objective 2:

Work with all practices in your organisation to help them take ownership of the web platform and promote from within.

Trisha's tip:

"The key to this is engaging each practice in the value of the system, encouraging them to identify an appropriate "super-user" to get fully involved in the work.' With the best will in the world, as the DEO you will not be able to be at each site every day, encouraging the teams to use the system. The practice super-user can carry out this vital part of the engagement activity. Your role is to provide initial and regular briefings for each team, materials and advice to help them use and advocate for the system, plus management guidance of the super-user via the steering group and personal visits. It is also important to engage members of the clinical team, as well as the administrative or reception team. The clinical team are trusted advisers for patients, and therefore can be powerful advocates for your new system."
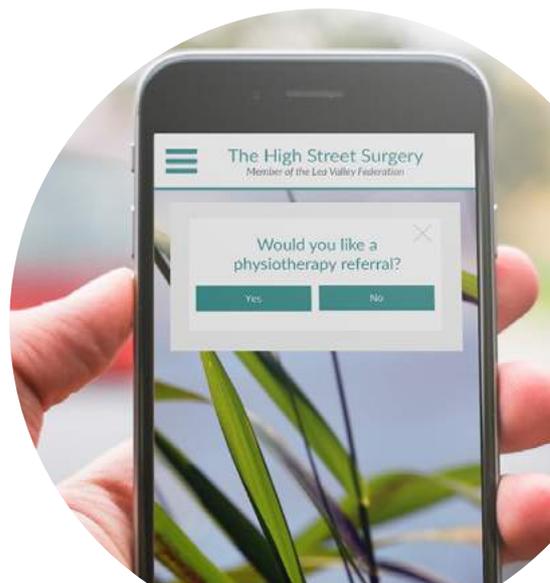
Step 4
Delivering effective community engagement

Reaching and resonating with a large and variable mix of people in a local community can be a difficult and daunting proposition. A good rule of thumb when embarking on this activity is to take the approach that 'one size will not fit all', it is therefore important for the DEO to be flexible and adaptable in how they engage with each individual or group. An ability to listen, identify and understand your audience's needs is imperative to delivering a successful community engagement programme.

In this section we will provide you with some more helpful tips from the DEO employed by the Lea Valley Federation, Trisha Featley. Following a year in the post, she has some good advice for future DEOs on how to successfully deliver key objectives to engage patients and bring about cultural change..

Objective 1:

Work with the technology provider, patient participation groups (PPG) and each practice in your organisation to ensure the public are informed about the implementation and expectations of the new web platform.

Trisha's tip:

"Set up introductory visits with each practice and spend time with each practice manager to find out about how the practice operates, their patient demographics, the processes that work well and challenges they may have. This will also help you to uncover how engaged they already are and how you can work with them to gain commitment to use the web platform. Also try to attend one of the PPG meetings (or equivalent) to brief the group and explain the benefits. Be reassuring and make sure you understand and can answer your audience's concerns. The PPG groups in our area tend to be made up of retirees, and it was important to reassure this particular group that it wasn't going to end up being an exclusively digital service. My message to them was that it is broadening the primary care offering, will free up telephone access and clinicians' time so that the elderly and frail who may not wish, or be able to use the website would be indirectly helped by this new service too. I was also able to gauge interest in taking part in 'digital awareness' sessions from this group.

I also spent a lot of time in each surgery waiting room using a tablet to show patients the services available on the web platform and how to use them. This was by far the most effective way of demonstrating benefits and increasing future use. "

Objective 2:

Help develop and implement a sound strategy to actively communicate and promote the visual identity of the website. Ensure the locality receives strong and consistent messages around digital opportunities for self-management and access to services online.

Trisha's tip:

"Make sure that you develop a communications strategy that pre-empts and diffuses any confusion for your patients or staff team/s. For example, we had to be careful that by communicating about the new website as the Lea Valley Federation, people did not think that all of the practices were merging. We gave a clear message that each local practice would continue to operate independently but that the website covers a wider area. We used the strapline 'your local practices working together' to help make that clear.

When developing any of the communication resources, stick to consistent brand guidelines so that the web platform's branding is in keeping with your organisation's brand identity. Make sure that you carry this branding through all of the material you produced e.g. posters, leaflets, plasma screen content, social and digital media activity. When communicating on social media, as well as promoting the new web platform, try to engage your audience with e.g. self-management and healthy lifestyle tips, health events or other services in the area that would benefit patients."

Objective 3:

Build local networks in the area to ensure all patient demographics are informed, engaged and competent to embrace the new digital technology. Attend various public forums to champion the website and promote online access at every available opportunity.

Trisha's tip:

"My intention throughout the whole project has been to build strong relationships with various groups and services throughout our locality, not only to spread the message about our services but also help the community understand how they could benefit from the online platform. An indirect benefit of this extensive engagement work was also that I learnt about what other health and wellbeing services were available in the local area and I could promote these to patients to help them get the right support for their needs.

I made sure to attend many events within the locality to try and reach a range of different people e.g. parent/toddler groups, libraries, the local gym, various social groups (U3A, over 60's, slimming world, pilates/yoga groups.)

When engaging with the groups I often demonstrated the services available and how to use them via a tablet. Helping individuals get familiar with the platform and understand the benefits in using it increased their confidence in both using the platform in the future and also helped them to be able to promote and explain the platform to others in their network. Engaging with PPGs is very important as they also have the ability to spread the word to other patients.

I found that leaflet dropping in highly frequented areas e.g. supermarkets did not work very well, people were generally too busy to stop or read information and the approach was impersonal. A one to one or small group discussion with hands on demonstration definitely felt like the most effective use of time."

Objective 4:

Develop an on-going programme of communication to ensure that people continue to access self-help services and other online services via the website; ensure that the website remains the first choice for online management of patients' primary care needs.

Trisha's tip:

"Our ongoing communication strategy is supported by information that I receive from key organisations that I have signed up to on line such as, the Public Health England resource centre, Diabetes UK and the British Heart Foundation. Then we can promote self-care services such as screening programmes that are available locally. This helps build trust within the community who have begun to feel that they can rely on our website for a wide range of information and resources. We are also looking to set up a web kiosk in the practices to help encourage people to try using the online services. Good wi-fi access is very important when encouraging people visiting the practice in person to switch to using the new system."

Step 5
Measuring and evaluating impact

In order to measure the impact of introducing a new web platform and employing a DEO to increase usage, it is recommended that you gather both statistical and anecdotal feedback from those using the system.

Over the 12-month period, your DEO would be required to monitor data and feedback and tailor communications activity accordingly i.e. if a relatively low number of people are using the system for prescription requests, the communications and engagement activity could be re-focussed to increase promotion of this particular service.

As part of your agreement with the technology provider, arrange to receive monthly statistical reports covering usage of the platform. The Lea Valley Federation also conducts a simple monthly survey asking only one question: If you were not able to make this request on line, what would you do? There are five answers to choose from (see fig. below for responses received).

Depending on the capability of your system, it may also be possible to segment the audience reached to tell you if for example, a large number of 18-35 year olds are using it but no 50-70 year olds.
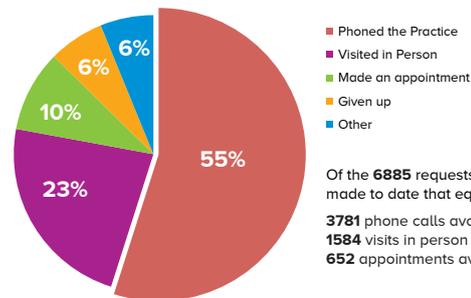
Website visits and usage since going live

Average monthly visits
Total Visits **11720**
Page Views **36876**

Total combined visits per month

Average monthly visits equates to 15% of your total list size

Patients were asked: If you were not able to make this request online what would you have done?

- Phoned the Practice — 55%
- Visited in Person — 23%
- Made an appointment — 10%
- Given up — 6%
- Other — 6%

Of the **6885** requests made to date that equates to:

3781 phone calls avoided
1584 visits in person avoided
652 appointments avoided

Total patients surveyed to date: 3930

By managing the engagement activity in a strategic way, the DEO will be able to provide you with:

- Reports demonstrating increased levels of usage on the digital platform, measured for each individual area i.e. health advice, online requests, signposting of apps etc;

- Case studies demonstrating how useful different members of the community have found the digital platform; and,

- A lessons learned report that could be shared with others looking to implement a similar system.

The adjacent table shows month by month usage stats for Lea Valley Federation. Following the employment of a DEO, there was a steady increase from approximately 30 patients using the site per month to approximately 600 per month, a significant improvement.

Lea Valley Health

Sites Live: 8   Total Patient List: 75928   Statistics created: 3rd April 2018

Request Type	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	
Ask a question of a practice team member	30	68	68	116	110	109	118	112	85	155	113	150	**1234**
Periodic health reviews	3	3	6	8	12	8	14	9	25	38	48	53	**227**
Patient details/ patient registration	63	126	100	142	146	174	178	167	121	174	146	190	**1727**
Contact practice or patient groups	14	20	39	48	64	63	53	65	55	67	73	115	**676**
Report request incl. sick note	7	26	27	30	51	36	43	45	49	71	64	68	**508**
Questionnaires/ health score cards	1	2	3				1	1	2		1		**11**
Prescription related request	37	59	135	142	132	89	126	101	89	116	117	138	**1281**
Feedback and complaints	1	5	9	4	3	7	12	2	8	3	4	1	**59**
Appointment related	8	6	6	4	7	13	19	7	3	9	10	13	**105**
Register a carer		3	3	4	3	5	2	2	3	3	5	6	**39**
Test results request	18	41	27	46	45	40	57	53	29	40	27	31	**454**
Other	18	31	29	43	54	42	52	41	24	62	49	33	**478**
Totals	**200**	**390**	**452**	**587**	**627**	**586**	**675**	**605**	**484**	**738**	**657**	**789**	**6799**

*Total for the last year only - not running total

About Eastern Academic Health Science Network

Eastern Academic Health Science Network (Eastern AHSN) operates as part of a national network of 15 AHSNs, established by NHS England, covering the counties of Bedfordshire, Hertfordshire, Cambridgeshire, Essex, Norfolk and Suffolk.

Our objective is to support the adoption of proven innovations that will benefit the health and wealth of people and businesses across the East of England.

Our support package includes innovation identification, providing implementation expertise, networking, modelling and guidance on accessing alternative funding streams.

Our strong network of connections, access to funding and ideas, and proven history of results, means that the projects we work on have a high certainty of success.

For more information on our projects please contact the Transformation Support Unit at:

STPsupport@eahsn.org

or visit www.eahsn.org/our-work/ supporting-transformation-nhs